## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

60000500,1008

		CLAIMS AS	(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			24					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 4 minus 20=		. 4			X\$ 9=		OR	X\$18=	.72
INDEPENDENT CLAIMS			minus 3 =				٠	X42=		OR	X84≃	ni
MULTIPLE DEPENDENT CLAIM PF			RESENT					+140=			+280=	***
* If the difference in column 1 is			less than ze	ro, enter	"0" in column 2					OR		0.1
CLAIMS AS AMENDED - PART II							•. •	TOTAL		OR:	TOTAL	THAN
(Column 1) (Column 2)						(Column 3)		SMALL I	NTITY	OR	SMALL	
NTA	age and a second	CLAIMS REMAINING AFTER AMENDMENT	A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Tôtal	. 22	Minus:	-2	4	ر نــــ		X\$ 9=		OR	X\$18=	*
AME	Independent	. 8	Minus	*** 4		- 4		X42=	_	OR	X8 <b>∳</b>	34400
	Fol Works	NTATION OF MI	ULTIPLE DEP	ENDENT	CLAIM		1	+140°=		OR	+280 <b>=</b>	
CANUL TINA								TOTAL		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	TOTAL	258.00
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT FEE	d
ENT B.		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		ŘATE	ADDI- TIONAL FEE		RATE.	ADDI- TIONAL FEE
WENDME	Total:		Minus			<b></b>		X\$ 9=	W.	OR	X\$16\$	
	Independent		Minus	***		=		X42=		OR.	X84 <b></b>	
	FIRST PRESE	NTATION OF M	JLTIPEE DEP	ENDENT	CLAIM.			+140=		OR:	+280= i	
		112	1415				• •	TOTAL		ا در	JOIAL	
1.40		(Column 1)		. (Coline	mn Öl	(Column 3	5.79	ADDIT. FEE			ADDIT FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		HATÉ	ADDI- TIONAL
ONE	Total	*	Minus	##	FUR	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del>)</del> - J.	X\$ 9=	FEE -	( )	1 XS18=+	FEE
MEN	Independent	*	Minus	0. <del>244</del>		( <del>=</del>	1	X42=.	2 3 0	OR	×84 <sub>₹</sub>	-
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			^~		OR.	AND THE	<del></del>
	f the entire in in-	mn 1 ic localities il	ha antai la cal::	mn O samile	• "O" in an	umn 3		+140= TOTAL		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	ADDIT FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.35 ^												
						<u> </u>	_			· 2 · 2 · 2	N - 10	

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 — 498-278/6915

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERC